



Every Woman Matters Programmatic Update

*A Publication of the Nebraska Every Woman Matters Program
May 2009*

Important Information for Every Woman Matters Providers

Reimbursement for Breast Ultrasound for Women 18-39

Effective Date April 1, 2009

Replaces guidelines sent out November 2008

Based on input from providers across the state regarding access to breast ultrasound, a survey was sent out to clinicians through the Nebraska Medical Association and the Nebraska Academy of Family Physicians. Changes in the policy below are reflective of survey results, input from the EWM Medical Advisory Committee and the best interests of Nebraska women aged 18-39. A summary of survey results are posted online:

<http://www.dhhs.ne.gov/womenshealth/ewm/ewmproviders.htm>

Clinical Breast Exam (CBE) Suspicious for Breast Malignancy

The Centers for Disease Control and Prevention recommends that every client 18 years of age and older with a suspicious clinical breast exam be referred to a surgeon.

18-39 Years of Age

• Reimbursement for breast ultrasound ordered by any clinician needs **preauthorization** for clients under the age of 40, **except** when recommended by a radiologist following a diagnostic mammogram in clients 30-39. **Preauthorization** of breast ultrasound approval is based on funding availability. Clinic staff are required to submit preauthorization information found on page 4 of the Breast Diagnostic Enrollment / Follow Up and Treatment Plan for Woman 18-64.

Policies regarding reimbursement are based on available funding. They reflect efforts to deliver the most cost effective public health program serving populations that carry the heaviest disease burden and mortality.

- Computer Aided Detection (CAD) is **NOT** reimbursable.
- Magnetic Resonance Imaging (MRI) is **NOT** reimbursable.

Dear Every Woman Matters Provider:

As many of you are aware, the program recently sent out a new reimbursement policy regarding breast imaging for women under 40. The policy allowed for an expansion of services not previously available through the program, to include breast ultrasound for women under 40 and diagnostic mammography for women under 30. The policy required these studies be ordered by a surgeon. The new policy was based on recommendations from the Every Woman Matters Medical Advisory Committee.

The Breast Cancer Subcommittee's rationale for expansion of services stemmed from the discussion that the above imaging was beneficial in the diagnoses of breast abnormalities in women under 40 and should be covered if possible. The expanded services are not reimbursable under policies of our funder, the Centers for Disease Control and Prevention, so the decision was made to begin covering them with private funds, as long as funds are available.

The rationale for having a surgeon's order was because many imaging studies ordered prior to referral to the surgeon are not used by the surgeon in the final diagnosis. They frequently order new or different imaging.

The policy has generated much discussion, centered on concerns regarding access issues and timeliness of diagnosis, especially in areas where a surgeon or breast specialist is not readily available. In an effort to create policies for the program that are based on sound clinical evidence as well as assure the best use of public health dollars, the Every Woman Matters program sought further input from providers regarding policies for breast imaging in women under the age of 40. We recognize that there is no perfect policy that will please 100% of providers or meet the needs of all women, but we do want to create the best policy based on input from providers. What follows are the results of the online survey that was distributed by the Nebraska Medical Association and the Nebraska Academy of Family Physicians and the new policy regarding breast imaging in younger women.

Helping Nebraska women live healthier lives,

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Every Woman Matters Survey Results Regarding EWM Breast Screening Policies

An online survey was distributed to Nebraska providers in February and March of 2009 in order to gain input on the recently distributed policy regarding breast imaging for women 18-39. The policy expanded services available to include breast ultrasound and diagnostic mammography for women 18-39 presenting with a clinically suspicious mammogram when ordered by a clinician. The survey was distributed by the Nebraska Medical Association and the Nebraska Academy of Family Physicians via their e-mail systems.

Twenty-three clinicians responded to the online survey with 57% reporting living in an urban setting, 17% in a semi-urban setting, and 26% in a rural setting. All but one respondent reported serving Every Woman Matters clients in their offices and all reported serving women 18-39 years of age. The majority (65%) reported their primary specialty as Family Medicine, 17% being General Surgery while the following specialties were reported by one respondent: Administrator, OB/Gyn, and Radiology.

The primary purpose was to gain further input on the program's expanded breast imaging policy for women 18-39. The survey allowed selection from three options to the following question:

“Knowing that the EWM program 1)serves primarily women 40-64 for breast cancer screening services, 2)has limited funding for women under the age of 40 to receive diagnostic services related to breast abnormalities, in your opinion which breast screening policy appears to provide appropriate services and appropriate use of public health dollars?”

None of the respondents selected the first option which would rescind the policy allowing for expanded breast imaging in younger women. Thirty-two percent of respondents selected the second option that would have continued the policy expanding breast imaging services for younger women when referred by a surgeon. The majority of respondents selected option three which modified the current policy to read:

Policies regarding reimbursement are based on available funding. They reflect efforts to deliver the most cost effective public health program serving populations that carry the heaviest disease burden and mortality. Reimbursement of breast ultrasound, ordered by any clinician, needs preauthorization for clients under the age of 40, except when recommended by a radiologist following a diagnostic mammogram in clients 30-39. Diagnostic mammography is reimbursable for women 30 years of age and older, ordered by any clinician in light of a suspicious clinical breast exam. Approval is based on funding availability.

All clinicians who reported Family Medicine as their primary specialty selected the last option.

Additional information gained from the survey included the following:

- ✕ 72% of all respondents would be willing to participate in another survey
- ✕ 68% had ever read a Every Woman Matters Provider Newsletter
- ✕ 69% would like to receive the EWM provider newsletter by e-mail
- ✕ 73% said they would not download the Newsletter from the EWM website
- ✕ 31% stated they had accessed the EWM website
- ✕ 47% states that their clinic staff accesses the EWM website